



PERMIT
NO: _____

REQUEST FOR FILM PERMIT

Applicant Information:

Name:
Address:
Telephone:
Email:

CITY APPROVAL FOR THE ISSUANCE OF THE TOWN OF SURFSIDE FILMING PERMITS

_____ is authorized to engage in commercial film production at
(Name of Production Unit)

_____ in the Town of Surfside on _____ the
(Location/s) **(Date/s)**

hours of _____ involving _____ vehicles and _____

individuals. The filming will be _____ for the purpose
(Still Photo)

of _____
(General description of filming: Movie, Commercial, TV, Catalog, etc.)

No work including positioning or removal of equipment will take place prior to or after time specified.
Police presence required during authorized hours.
This permit must be displayed upon request by the Town of Surfside Police or Code Enforcement Officers.
No excessive noise.
No parking on the Street or on the landscaping area.

Date(s)	Authorized Signature(s)
_____	_____ (City Manager)
_____	_____ (Building Official)
_____	_____ (Chief Police)